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STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER Nation Center News		2. DATE 9.29.21
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE $ 69.00

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)
PO Box 173 Buffalo Harding County SD 57720

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)
PO Box 7 Spearfish SD 57783

6. FULL NAME OF PUBLISHER: Letitia Lister

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Seaton Publishing Co Inc.	PO Box 7 Spearfish SD 57783

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

None

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1443	1434
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	328	329
2. Mail Subscription (Paid and or requested)	1049	1055
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1377	1384
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	21	20
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1398	1404
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	20	8
2. Return from News Agents	25	22
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1443	1434

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

(Signature)

President, Publisher
(Title)

State of South Dakota)
§
County of Lawrence)

Sworn to before me this 29th day of Sept., 2021

Notary Public

My commission expires: 7-18-2025

(Seal)

Form: SOS REC 051 9/2016